

| POSITION | INITIALS | ID NO. | DATE |
|---------------------------|----------|--------|----------|
| FEE DETERMINATION | | | |
| O.I.P.E. CLASSIFIER | | | |
| FORMALITY REVIEW | SS | JC877 | 11-29-00 |
| RESPONSE FORMALITY REVIEW | | | |

INDEX OF CLAIMS

| | | | |
|---------------------|------------|---|--------------|
| ✓ | Rejected | N | Non-elected |
| - | Allowed | I | Interference |
| - (Through numeral) | Canceled | A | Appeal |
| - | Restricted | O | Objected |

| Claim | Date | Claim | Date | Claim | Date |
|-----------|------|-----------|------|----------|------|
| Final | | Final | | Final | |
| Original | | Original | | Original | |
| 6-12-2003 | | 6-12-2003 | | | |
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If more than 150 claims or 10 actions
staple additional sheet here

(LEFT INSIDE)